

MARY JUDE NURSING HOME
9806 WEST LINCOLN AVENUE

WEST ALLIS 53227 Phone: (414) 543-5330

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 51

Total Licensed Bed Capacity (12/31/03): 51

Number of Residents on 12/31/03: 50

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 50

Corporation

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		36.0
Supp. Home Care-Personal Care	No					1 - 4 Years		38.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		10.0
Day Services	No	Mental Illness (Org./Psy)	52.0	65 - 74	2.0			----
Respite Care	No	Mental Illness (Other)	10.0	75 - 84	26.0			84.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	62.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	8.0	95 & Over	10.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	14.0	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	4.0		-----	RNs		6.8
Referral Service	No	Diabetes	2.0	Gender	%	LPNs		11.2
Other Services	No	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	10.0	Male	22.0	Aides, & Orderlies		
Mentally Ill	No		----	Female	78.0			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	3	100.0	244	33	94.3	122	0	0.0	0	10	100.0	171	2	100.0	122	0	0.0	48	96.0
Intermediate	---	---	---	2	5.7	101	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	4.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	3	100.0		35	100.0		0	0.0		10	100.0		2	100.0		0	0.0	50	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	4.3	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.4	Bathing	0.0	68.0	32.0	50
Other Nursing Homes	10.0	Dressing	22.0	44.0	34.0	50
Acute Care Hospitals	81.4	Transferring	36.0	44.0	20.0	50
Psych. Hosp.-MR/DD Facilities	2.9	Toilet Use	30.0	48.0	22.0	50
Rehabilitation Hospitals	0.0	Eating	74.0	18.0	8.0	50
Other Locations	0.0	*****				
Total Number of Admissions	70	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	4.0	Receiving Respiratory Care	0.0	
Private Home/No Home Health	7.6	Occ/Freq. Incontinent of Bladder	66.0	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	42.0	Receiving Suctioning	0.0	
Other Nursing Homes	4.5			Receiving Ostomy Care	6.0	
Acute Care Hospitals	56.1	Mobility		Receiving Tube Feeding	0.0	
Psych. Hosp.-MR/DD Facilities	1.5	Physically Restrained	0.0	Receiving Mechanically Altered Diets	34.0	
Rehabilitation Hospitals	0.0					
Other Locations	3.0	Skin Care		Other Resident Characteristics		
Deaths	27.3	With Pressure Sores	2.0	Have Advance Directives	100.0	
Total Number of Discharges		With Rashes	2.0	Medications		
(Including Deaths)	66			Receiving Psychoactive Drugs	34.0	

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	98.0	84.7	1.16	88.1	1.11	86.6	1.13	87.4	1.12
Current Residents from In-County	94.0	81.8	1.15	88.7	1.06	84.5	1.11	76.7	1.22
Admissions from In-County, Still Residing	35.7	17.7	2.02	20.6	1.73	20.3	1.76	19.6	1.82
Admissions/Average Daily Census	140.0	178.7	0.78	189.9	0.74	157.3	0.89	141.3	0.99
Discharges/Average Daily Census	132.0	180.9	0.73	189.2	0.70	159.9	0.83	142.5	0.93
Discharges To Private Residence/Average Daily Census	10.0	74.3	0.13	75.8	0.13	60.3	0.17	61.6	0.16
Residents Receiving Skilled Care	96.0	93.6	1.03	94.9	1.01	93.5	1.03	88.1	1.09
Residents Aged 65 and Older	100	84.8	1.18	91.0	1.10	90.8	1.10	87.8	1.14
Title 19 (Medicaid) Funded Residents	70.0	64.1	1.09	48.6	1.44	58.2	1.20	65.9	1.06
Private Pay Funded Residents	20.0	13.4	1.49	30.8	0.65	23.4	0.86	21.0	0.95
Developmentally Disabled Residents	0.0	1.1	0.00	0.4	0.00	0.8	0.00	6.5	0.00
Mentally Ill Residents	62.0	32.2	1.93	31.3	1.98	33.5	1.85	33.6	1.85
General Medical Service Residents	10.0	20.8	0.48	24.1	0.41	21.4	0.47	20.6	0.49
Impaired ADL (Mean)	45.6	51.8	0.88	48.8	0.94	51.8	0.88	49.4	0.92
Psychological Problems	34.0	59.4	0.57	61.9	0.55	60.6	0.56	57.4	0.59
Nursing Care Required (Mean)	5.5	7.4	0.74	6.8	0.81	7.3	0.76	7.3	0.75